

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		1. Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of 1	Information in the shaded areas is not required by Federal law.	
3. Generator's Name and Mailing Address		Douglas Aircraft Co. 190th & Normandie Ave. Torrance, CA 90502		A. State Manifest Document Number 84827688		
4. Generator's Phone (533-6677)		6. US EPA ID Number		B. State Generator's ID		
5. Transporter 1 Company Name		I. T. Corporation		C. State Transporter's ID		
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone		
9. Designated Facility Name and Site Address		10. US EPA ID Number		E. State Transporter's ID		
U. S. Ecology Hiway 95 - 18 miles P.O. Box 578 Beatty, Nev.		NVT 230010000		F. Transporter's Phone		
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers No.	Type	13. Total Quantity	14. Unit Wt/Vol	1. Waste No.
a. Waste Polychlorinated Biphenyles ORM-E UN2315 RQ-10/4.54		002	CM	16400	P	261 PCB
b. Waste Polychlorinated Biphenyles ORM-E UN2315 RQ-10/4.54		001	DM	00060	P	261 PCB
c.						
d.						
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above				
Transformers drain flushed with vermiculite Trash & rags with vermiculite						
15. Special Handling Instructions and Additional Information						
Dike and contain spill. Avoid contact with skin & eyes. Use gloves, goggles. Alternate TSDF - Return to DAC CA EH PERMIT 39160						
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.						
Printed/Typed Name		Signature			Date	
Donald C. Gerber		[Signature]			Month Day Year	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature			Date	
Printed/Typed Name		Signature			Date	
VERN SWOPE		[Signature]			Month Day Year	
18. Transporter 2 Acknowledgement of Receipt of Materials		Signature			Date	
Printed/Typed Name		Signature			Date	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.						
Printed/Typed Name		Signature			Date	
					Month Day Year	

YELLOW: GENERATOR RETAINS